## **APPENDIX 280.2**

## STATE OF MISSISSIPPI

## SELF CERTIFICATION OF UST SYSTEM RETURN TO DELIVERY ELIGIBILITY

<b>UST OWNER</b>		UST FACILITY	
Owner Name		Facility Name	
Owner Address		Facility Physical Street Address	
City	State	City	State
			MS
Phone		County	
Tank Owner Contact Person		MDEQ UST Facility I.D. Number	

## I CERTIFY UNDER PENALTY OF LAW THAT:

- 1. The underground storage tank facility referenced above has completed the repairs/modifications necessary to establish compliance and is eligible to receive product deliveries.
- 2. I have personally examined and am familiar with the information contained in this submittal and any accompanying documents. This information, to the best of my knowledge, is true, accurate and complete.
- 3. I am aware that there are significant penalties for knowingly submitting false information.

UST OWNER	MDEQ CERTIFIED UST INSTALLER	
Printed Name of Owner or Authorized Representative	Printed Name of Certified UST Installer	
Owner's Signature	Installer's Signature	
Date	Date	MDEQ Certification Number

This form must be signed by both the UST owner and a MDEQ certified UST installer.

MDEQ reserves the right to make the final determination of whether or not the UST facility has satisfactorily returned to compliance.